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(Re	questor's Name)			
(Ad	dress)	<u> </u>		
(Address)				
(Cit	y/State/Zip/Phone	= #)		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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TRANSMITTAL LETTER

TO: Registration Sec Division of Cor				
SUBJECT: Bentley's,	LLC			
(Name of Limited Liability Company)				
The analoged Amieles of	Oussenization and fac(s) are a	showitted for filin		
	Organization and fee(s) are su			
Please return all correspond	ondence concerning this matte	r to the following	g:	
Lee Flem	ing			
	(1)	Name of Person)		
Bentley's, LLC		<u>.</u>		
	(1	Firm/Company)		
4401 Ashtor	Road, Suite A	(Address)		
		(Address)		
Carra	-1- El 04000			
Saras	ota, FL 34233 (City/	State and Zip Code	e}	 -
		•		
For further information of	concerning this matter, please	call:		
م رسو و		0.44	025 0220	
Lee Fleming (Name	of Person)	at (941 (Area Coo	le & Daytime Te	lephone Number)
`	•		ŕ	,
Enclosed is a check fo	r the following amount:			
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 F Certified Cop	iling Fee &	Certificate of Status &
		(additional copy	is enclosed)	Certified Copy (additional copy is enclosed)
STRE	ET ADDRESS:		MAILING A	ODRESS:
Registration Section		Registration Section		
Division of Corporations 409 E. Gaines Street		Division of Corporations P.O. Box 6327		
Tallahassee, Florida 32399		Tallahassee, Florida 32314		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bentley's, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 4401 Ashton Road, Suite A, Sarasota, FL 34233

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Lee Fleming

4401 Ashton Rd., Suite A
Florida street address (P.O. Box NOT acceptable)

Sarasota, FL 34233

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F. S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

[x] The Limited Liability Company is to be managed by the members.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated became are true.)

that the facts stated herein are true.)

Lee Fleming, MGRM

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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